

image B

2818

Please type a plus sign (+) inside this box

+

PTO/SB/82 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|--|------------------------|----------------|
| REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT | Application Number | 09/551716 |
| | Filing Date | April 18, 2000 |
| | First Named Inventor | Mark A. Reed |
| | Group Art Unit | 2818 |
| | Examiner Name | Trong Phan |
| | Attorney Docket Number | YU- P06-002 |

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☐ Please change the correspondence address for the above-identified application to:

☐ Customer Number →
Customer Number

OR

| | | | | | |
|---|------------------------|-----------|---------------|-----|--------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Fish & Richardson P.C. | | | | |
| Address | 225 Franklin Street | | | | |
| City | Boston | State | Massachusetts | Zip | 02110-2804 |
| Country | USA | Telephone | 617-542-5070 | Fax | 617-542-8906 |

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

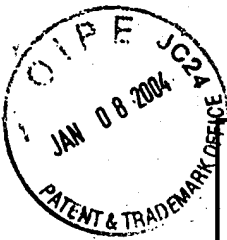
SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|---|
| Name | Dorothy K. Robinson, V.P. & General Counsel YALE UNIVERSITY |
| Signature | |
| Date | October 8, 2002 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.

| | |
|--|---|
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below. | |
| Dated: <u>11/6/04</u> | Signature: (Cross-Signed) Ginny Blundell |



Please type a plus sign (+) inside this box



PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| | |
|----------------------|---------------------------------------|
| Application Number | 09/551716 |
| Filing Date | April 18, 2000 |
| First Named Inventor | Mark A. Reed |
| Title | MOLECULAR SCALE ELECTRONIC DEVICES |
| Group Art Unit | 2818 |
| Examiner Name | Trong Phan |
| Attorney Docket No. | YU-P06-002 |

I hereby appoint:

☒ Practitioners at Customer Number

28120

Customer Number

28120

28120

Customer Number Bar Code

OR

☐ Practitioner(s) named below:

| Name | Registration Number | Name | Registration Number |
|------|------------------------|------|------------------------|
| | | | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

Customer Number

Customer Number Bar Code

☒ Firm or
Individual Name

Wolfgang E. Stutius
ROPES & GRAY

Address One International Place

| | | | | | |
|---------|--------|-----------|----------------|-----|----------------|
| City | Boston | State | MA | Zip | 02110-2624 |
| Country | US | Telephone | (617) 951-7000 | Fax | (617) 951-7050 |

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|---|
| Name | Dorothy K. Robinson, V.P. & General Counsel YALE UNIVERSITY |
| Signature | <i>Dorothy K. Robinson</i> |
| Date | October 8, 2002 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☐ *Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below.

Date: 1/6/04 Signature: *Ginny Blundell* ~~XXXXXX~~ Ginny Blundell



I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 1/6/04 Signature: [Signature]
(Ginny Blundell)

Docket No.: YU-P06-002
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Reed et al.

Application No.: 09/551716

Group Art Unit: 2818

Filed: April 18, 2000

Examiner: T. Phan

For: MOLECULAR SCALE ELECTRONIC
DEVICES

CHANGE OF ATTORNEY DOCKET NUMBER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Please note that the Attorney Docket Number has been changed from 02893-036001 to YU-P06-002. Please reference YU-P06-002 on all future correspondence.

Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 18-1945, under Order No. YU-P06-002 from which the undersigned is authorized to draw.

Dated: January 6, 2004

Respectfully submitted,

By [Signature]
Wolfgang E. Stutius
Registration No.: 40,256
ROPES & GRAY LLP
One International Place
Boston, Massachusetts 02110-2624

(617) 951-7000
(617) 951-7050 (Fax)
Attorneys/Agents For Applicant